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December 30, 2014



**BOARD OF SUPERVISORS** 

Hilda L. Solis First District

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TO:

**Each Supervisor** 

FROM:

Cynthia A. Harding, M.P.H.

Interim Director

SUBJECT:

MULTI-DEPARTMENTAL MEDI-CAL OUTREACH AND ENROLLMENT

Syllia A. Above

**GRANT UPDATE (ITEM 13, BOARD AGENDA OF JUNE 10, 2014)** 

This quarterly report is in response to Supervisor Ridley-Thomas' June 10, 2014 motion requesting the Directors of Public Health (DPH), Mental Health (DMH), Health Services (DHS), Public Social Services (DPSS), and the Sheriff's Department to provide updates on the implementation of the Multi-Departmental Medi-Cal Outreach Grant. On September 18, 2014, I provided your Board a preliminary status update on outreach and enrollment start-up activities for July 1 – August 31, 2014. This first full quarterly report covers the Departments' outreach and enrollment progress for the grant period of July – September 2014.

### **Background**

On June 10, 2014, your Board approved authorization to accept a \$7 million grant award from the California Department of Health Care Services (DHCS) effective July 1, 2014 through December 31, 2016. The purpose of the Medi-Cal Outreach and Enrollment grant is to conduct outreach and enroll residents newly eligible for Medi-Cal.

On September 18, 2014, DPH provided the Board an initial status update on the Medi-Cal outreach and enrollment start-up activities. This current report contains comprehensive Quarter 1 (July 1 – September 30, 2014) data and progress toward project goals. Attached to this report is the State-approved revised Project Work Plan which delineates Departmental targets for the grant activities (Attachment 1).

#### **Target Populations**

The DHCS Medi-Cal Outreach and Enrollment Assistance project aims to reach and assist specific hard-to-reach uninsured populations. The table below shows target populations by assigned departments.

Target Population	Department
Persons with mental health disorder needs	DMH
Persons with substance use disorder needs	DPH/SAPC
Young men of color	DHS, DPSS
Incarcerated persons	Sheriff's Department
Families of mixed immigration status	DHS, DPH/MCAH
Persons with limited English proficiency	DHS, DPH/MCAH
Persons who are homeless	DHS

### Implementation

The DPH Maternal, Child and Adolescent Health (MCAH) Programs, is the lead Division for this project, and has taken steps to successfully implement the new grant in partnership with DMH, DPSS, DHS, DPH Substance Abuse Prevention and Control (SAPC) and Sheriff's Department.

Since the inception of the project, DPH/MCAH hired a Project Manager to coordinate the overall initiative and ensure that grant objectives are met. DPH also finalized the contract agreement with DHCS (i.e., "State Allocation Plan"), and submitted a detailed and revised project work plan, budget, and invoice. Interdepartmental coordination included finalizing the Memorandum of Understanding (MOU) between DPH and each County department. DPH developed interdepartmental reporting and invoice processing.

DPH/MCAH staff coordinated three full days of training for outreach and enrollment staff from all departments and their subcontracting agencies excluding DPSS. Training modules included an overview of Medi-Cal eligibility and enrollment procedures and processes as well as CHOI data system training for all outreach and enrollment staff. DPH/MCAH staff convenes bi-weekly workgroup calls with the participating departments to disseminate information, provide technical troubleshooting assistance, and determine report progress on the grant. DPH/MCAH staff also maintain ongoing contact with DHCS for technical assistance and project updates, and DPH Finance for appropriate budgeting and invoicing.

#### **Data Collection**

DPH/MCAH's Children's Health Outreach Initiative (CHOI) program was established to provide a mechanism for reducing the number of uninsured residents through a coordinated outreach effort for low-income children. DPH contracts with community-based agencies to provide outreach and enrollment services for the uninsured population. Data from these services is collected and input into a web-based system available to each of the contracted agencies called the "CHOI data system". Agency staff utilize the CHOI data system to track client demographic and contact information in order to re-contact families for appropriate and timely follow-up. The system is also used for contracted agencies to generate reports for DPH/MCAH, providing an audit trail for work completed by each agency.

DPH/MCAH made enhancements to its existing outreach and enrollment CHOI data system. Enhancements included applying modifications for additional system users and adding data fields to capture data specifically required for this project.

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During the July-September 2014 period, the CHOI data system was fully utilized for grant activities by DPH/MCAH, DPH/SAPC, DHS, and, partially, by DMH. Due to system enhancements mentioned above, the Sheriff's Department began using the full CHOI data system in October 2014. DPSS opted to use their own Your Benefits Now (YBN) system rather than the CHOI data system to track grant enrollment activities.

### **Outreach and Enrollment Progress**

The entire Project Collaborative includes 5 County departments and 37 contractors and subcontractors. More than 80 community-based and faith-based organizations and other entities partnered with the Collaborative using various outreach and enrollment strategies in order to reach the specified target population. During July 1, 2014 – September 30, 2014 period, outreach and in-reach activities were provided to 10,231 persons in total. 3,724 persons were assisted with completing Medi-Cal applications of which 525 individuals were successfully confirmed as enrolled in the program.

Strategies, progress, challenges, and solutions are briefly summarized for each department in Attachment 2. Also attached is the project data summary including outreach, enrollment, and retention target numbers. The data illustrate the year-to-date progress made by each department and by the collaborative in total (Attachment 3).

The next comprehensive quarterly report covering the October - December 2014 reporting period will be submitted to your Board in February 2015. If you have any questions or would like additional information, please let me know.

#### CAH:sb

#### Attachments

c: Interim Chief Executive Officer
County Counsel
Acting Executive Officer, Board of Supervisors
Health Services
Mental Health
Public Social Services
Sheriff's Department

Fiscal Years 2014-2015 and 2015-2016

# **Activity 1 – Program Planning and Startup**

Activity 1: Identify major O&E planning and startup milestones, strategies, and activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients targeted by O&E efforts by X).

#### MILESTONE:

**DESCRIPTION OF STRATEGY/ACTIVITY:** 

For each objective, list each partner separately and indicate the number of individuals that they plan to enroll into Medi-Cal.

Describe below what and or how each partner plans on achieving their goals that are identified in the adjacent milestones. What methods/means will be used to achieve these goals and objectives?

#### **Collaborative Partners**

Department of Public Health/ Maternal, Child, and Adolescent Health (DPH/MCAH)

Department of Public Health/ Substance Abuse and Prevention Control (DPH/SAPC)

Department of Health Services (DHS)

Department of Mental Health (DMH)

Department of Public Social Services (DPSS)

Sheriff's Department (LASD)

MILESTONES	STRATEGIES/ACTIVITIES	AB 82 POPULATION GROUP(S)	TIMELINE	WHO IS RESPONSIBLE
Enrollment Numbers/ Completed Applications:  DPH/MCAH: 8,000	<ul> <li>Convene and facilitate weekly LAC DHCS Grant workgroup calls with Departments to plan implementation</li> </ul>	Limited English Proficient (LEP), Mixed-status families, Homeless, Young Men of Color,	January	DPH/MCAH as facilitator; Partnering Depts. (DPH/SAPC, DHS, DMH, DPSS and LASD) as Workgroup members
DPH/SAPC: <b>2,940</b> DHS: <b>9,000</b> DMH: <b>5,140</b> DPSS: <b>2,030</b> <u>LASD: <b>20,000</b></u>	<ul> <li>Work with County Chief Executive Office (CEO) on County's grant implementation Board Letter package (execute authority, determine budget allocations, finalize deliverable target numbers and scope of work) for Board of Supervisors' and DHCSs' approval</li> </ul>	Persons with Substance Use Disorder Needs, Persons with Mental Health Disorder Needs, incarcerated populations	June 2014	CEO, DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS and LASD
Total: 47,110  OBJECTIVE: Finalize Work Plan and implement essential County	<ul> <li>Facilitate collaboration between Departments data collection systems to ensure data collection and reporting is comprehensive and uniform</li> </ul>		June – August 2014	DPH/MCAH and various IT/Database administrators for DPH/SAPC, DHS, DMH, DPSS and LASD
processes to identify, screen, inform and provide Medi-Cal enrollment and retention services to all uninsured Grant target populations	<ul> <li>Facilitate the development of the Inter-Departmental invoicing system so that each Dept. bills and receives reimbursement for their work</li> </ul>		April – July 2014	DPH Finance and Finance Contacts in each Partnering Dept. (DPH/SAPC, DHS, DMH, DPSS, and LASD

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Enrollment Numbers/ Completed Applications:  DPH/MCAH: 8,000	<ul> <li>Develop, negotiate and finalize contract amendments and augmentations with sub-contractors, including finalizing each contractor's budgets and scopes of work for FY 14-15 and FY 15-16</li> </ul>	LEP, Mixed Status Families, Homeless, Substance Use Disorder Needs, Mental Health Disorder Needs	April – July 2014	DPH/MCAH, DPH/SAPC, DHS and DMH
DPH/SAPC: <b>2,940</b> DHS: <b>9,000</b> DMH: <b>5,140</b>	<ul> <li>Develop, release, review and select contractors via an Request for Applications among their community provider clinic contractors and homeless services contractors</li> </ul>	LEP, Mixed-Status Families and Homeless	March-July 2014	DHS
DPSS: <b>2,030</b> <u>LASD: <b>20,000</b></u> <b>Total: 47,110</b>	<ul> <li>Develop list of potential locations and community partners for outreach activities and events; engage the DPSS Health and Nutrition Mobile Office (Mobile Outreach Unit) in the planning process</li> </ul>	Young Men of Color	April – July 2014	DPSS
OBJECTIVE: County Staff and Contractors	<ul> <li>Conduct internal processes necessary to bring on 5 full-time Sheriff Custody Assistants who will be conducting the outreach and enrollment work within the LA County jail system</li> </ul>	Incarcerated population	April – July 2014	LASD
are prepared to implement the MC Outreach and Enrollment Plan	<ul> <li>Plan and conduct trainings on Medi-Cal screening, enrollment, troubleshooting and retention, along with training on using various data collection databases</li> </ul>	Persons with Substance Use Disorder Needs,	June – September	DPH/MCAH and their training contractor, staff and subcontractor staff from DPH/MCAH, DPH/ SAPC,DHS,DMH,DPSS, LASD as participants
	<ul> <li>Plan and complete the internal County processes (Work Order Solicitation) necessary to hire a temporary 2-year Project Manager to oversee the entire coordination of the Grant across the partnering County Departments</li> </ul>		March-July 2014	DPH/MCAH
Enrollment Numbers/ Completed Applications:  DPH/MCAH: 8,000	<ul> <li>Plan and conduct presentation regarding the DHCS Grant to the Everyone On Board Collaborative, a coalition of over 40 community-based organizations, health providers and government agencies whose mission is to successfully implement the ACA in LA County</li> </ul>		February – March 2014	CEO, DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS and LASD
DPH/SAPC: <b>2,940</b> DHS: <b>9,000</b> DMH: <b>5,140</b> DPSS: <b>2,030</b> LASD: <b>20,000</b>	PC: 2,940 - Meet with community stakeholders and County Board of Supervisors district offices to discuss the County's implementation plan, reaching the target populations, addressing any gaps in outreach, and achieving enrollment targets  Per Supervisors district offices to discuss the County's US Per Sup	Persons with Substance Use Disorder Needs, Persons with Mental Health Disorder Needs, incarcerated populations	March – June 2014	CEO, DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS and LASD
Total: 47,110  OBJECTIVE: Ensure stakeholders are aware of impending and ongoing enrollment activities	<ul> <li>Present regular updates on the status of the DHCS Grant implementation at various health coverage meetings and coalitions, including Everyone on Board, LA Access to Health Coverage Coalition, DPSS/DPH Health and Nutrition (Medi- Cal and Cal Fresh) meeting, LA Health Collaborative/Insure the Uninsured Project meetings, and the DPH CHOI Outreach and Enrollment Contractors meeting</li> </ul>	and to Health n (Medi- e/Insure	March 2014 - ongoing	DPH/MCAH and DHCS Grant Project Manager (housed under DPH/MCAH)

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# **Activity 2 – Outreach and Enrollment Activities**

Activity 2: Identify major O&E activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients targeted by O&E efforts by X).

# **Activity 2a – Outreach**

Outreach is a service provided when we raise an individual's awareness/understanding of what is Medi-Cal and what can be done to enroll.

How to measure: An "outreach or in-reach contact" is defined as speaking directly either in person or by telephone with a client or potential client(s) to publicize available health care options and services. Outreach contacts may include education, promotion, presentations, and informational activities and may be to individuals or groups of people who may be clients, potential clients or personnel with access to potential clients.

#### MILESTONE:

#### DESCRIPTION OF STRATEGY/ACTIVITY:

For each objective, list each partner separately and indicate the number of individuals that they plan to enroll into Medi-Cal.

Describe below what and or how each partner plans on achieving their goals that are identified in the adjacent milestones. What methods/means will be used to achieve these goals and objectives?

#### **Outreach Numbers:**

DPH/MCAH- 30,000 DPH/SAPC- 8,400 DHS- 12,000 DMH- 19,040 DPSS- 13,920 LASD- 20,000

Collaborative Total: 103.360

MILESTONES	STRATEGIES/ACTIVITIES	LOCATION*	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Partner: DPH/MCAH  Outreach Contacts Total: 30,000	<ul> <li>Contracted agencies will hire additional staffing to fulfill DHCS grant personnel and conduct DHCS Grant Scope of Work activities</li> </ul>	Across LA County – one or more agencies in each of the 8 Service Planning Areas (SPAs)		July – September 2014	DPH/MCAH Contracted Agencies
(15,000/year)	<ul> <li>Agencies will schedule outreach events and maintain a list or calendar of sites, dates and times</li> </ul>	Across LA County's 8 SPAs	LEP and Mixed Status Families	July 2014 – June 2016	DPH/MCAH Contracted Agencies
	<ul> <li>Agencies will conduct outreach via telephone, walk-ins, events (presentations, fairs, etc.) and complete outreach summaries. Event summaries to include site, date, name of staff, flyers, number of individuals contacted, sign-in sheets and if appropriate, materials presented</li> </ul>	Across LA County's 8 SPAs		July 2014- June 2016	DPH/MCAH Contracted Agencies

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Partner: DPH/SAPC Outreach Contacts Total: 8,400 (4,200/year)	- Initiate outreach to patients of Substance Use Disorder (SUD) treatment programs	At each of the 8 DPH/SAPC's contracted Community Assessment Service Centers (CASCs), with one located in each SPA in LA County	Persons with Substance Use Disorder needs	Sept. 2014 – June 2016	DPH/SAPC Contracted Community Assessment Service Centers (CASCs)
	<ul> <li>Outreach and education patients of SUD treatment services and those seeking services about Medi-Cal</li> <li>Initiate Medi-Cal eligibility screening with patients of SUD treatment programs and those seeking entrance to programs</li> </ul>	Each of the 8 DPH/SAPC's contracted Community Assessment Service Centers (CASCs)		Sept. 2014 – June 2016	DPH/SAPC Contracted Community Assessment Service Centers (CASCs)
Partner: DHS  Outreach Contacts Total: 12,000 (Year 1: 7,200; Year 2: 4,800)	The 8 DHS Grantees selected through a solicitation process of CP and ICMS providers will hire their FTE Outreach and Enrollment Worker	Each of the 8 DHS Grantee CP and ICMS providers, located in each of the LA County SPAs		July- Sept. 2014	DHS Contracted Grantees – CP and ICMS providers
	- The 8 DHS Grantees will schedule and perform outreach activities aimed at the target populations in community-based settings, outside of clinic/provider walls. These include gyms, community/ trade colleges, community gathering events, homeless shelters and other areas of high concentrations of homeless (e.g.; Skid Row), and in people's homes utilizing the Promotora model		LEP, Mixed status families, Young Men of Color, an homeless individuals	By December 2014 – June 2016	DHS Contracted Grantees – CP and ICMS providers

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Partner: DMH  In-reach and Outreach Contacts Total: 19.040 (9,520/year)  In-reach Total: 9,520 (4,760/year)  Outreach Total: 9,520 (4,760/year)	, , ,	Throughout DMH directly- operated and contracted programs, which are located across LA County's 8 SPAs  Across LA County's 8 SPAs  Across LA County's 8 SPAs at locations that include:  - CBOs serving under- represented ethnic populations; - faith-based organizations, such as, churches, temples and mosques; - National Alliance on Mental Illness (NAMI) chapters; - transition-age youth (TAY) drop-in centers; - emergency shelter programs; - disabled student centers on community college campuses; and - homeless shelters and encampments.	Persons with mental health disorder needs	August 2014 – June 2016	DMH contracted benefits establishment agencies
Partner: DPSS  Outreach Contacts Total: 13,920 (6,960/year)	<ul> <li>(DPSS) will participate in outreach events in venues attractive to young men of color.</li> <li>Develop calendar of events</li> <li>Calendar DPSS Mobile Outreach Unit to attend events</li> </ul>	Events will take place across the 8 LA County SPAs may potentially include: - Fiestas Patrias - Taste of Soul - Care Harbor - Fiesta Broadway - Grand Prix of Long Beach - Antelope Valley Fair - 626 Night Market - LA Greek Festival - Walnut Park Summer - Watts Summer Fest - Wilmington Health Festival - Community College Events	Young Men of Color	September 2014 – June 2016	DPSS and DPSS Mobile Outreach Unit

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	<ul> <li>DPSS will partner with community-based organizations, non-profits and other county agencies to outreach to young men of color through print media and other marketing channels.</li> <li>Develop calendar of events</li> <li>Calendar DPSS Mobile Outreach Unit to attend events</li> <li>DPSS will partner with county departments to provide on-site workshops specifically geared towards youth including health check-ups provided by county departments</li> <li>Develop calendar of events</li> <li>Calendar DPSS Mobile Outreach Unit to attend events</li> </ul>	Across LA County's 8	Young Men of Color	September 2014 – June 2016	DPSS and DPSS Mobile Outreach Unit
Partner: LASD	LASD will obtain Medi-Cal educational materials and post within the intake centers and inmate housing units. LASD Custody Assistants within the Community.	Outreach and Enrollment activities will take place	Incarcerated populations	July 2014- June 2016	LASD Custody Assistants within
Outreach Contacts Total: 20,000 (10,000/year)	Custody Assistants within the Community Transition Unit will educate inmates about Medi-Cal, answer questions, and check inmates records for Medi-Cal eligibility	within 7 jail facilities across LA County			the Community Transition Unit

<sup>\*</sup>Across LA County – one or more agencies/departments in each of the 8 Service Planning Areas (SPAs): 1. Antelope Valley, 2. San Fernando Valley, 3. San Gabriel Valley (including Pasadena), 4. LA Metro, 5. Westside/Santa Monica, 6. South LA, 7. Southeast LA County, 8. South Bay and Long Beach

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# **Activity 2 – Outreach and Enrollment Activities**

Activity 2: Identify major O&E activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients targeted by O&E efforts by X).

# **Activity 2b – Enrollment**

Enrollment is measured as the number of approved Medi-Cal applications resulting from Medi-Cal outreach and application assistance efforts.

How to measure: Two steps need to be completed in order to measure enrollment: completed applications and confirmed enrollment.

- "Completed applications" is defined as the number of clients assisted to fill out health insurance applications line-by-line, through in-person, telephone assistance or electronic submission.
- "Confirmed enrollment" is defined as: 1) the number of clients who have stated that they received successful enrollment notification from insurer and/or 2) the number of clients who have been verified enrolled by appropriate insurer or computer system.

#### MILESTONE:

#### DESCRIPTION OF STRATEGY/ACTIVITY:

For each objective, list each partner individuals that they plan to enroll into Medi-Cal.

Describe below what and or how each partner plans on achieving their goals that are identified in the adjacent milestones. What separately and indicate the number of methods/means will be used to achieve these goals and objectives?

### **Enrollment Numbers**

1.	Completed Applications :
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DPH/MCAH - 8,000 DPH/SAPC - 2,940

DHS - 9,000

DMH - 5,140

DPSS - 2,030 LASD - 20,000

Collaborative Total: 47.110

2. Confirmed Enrollment:

DPH/MCAH - 6,000

DPH/SAPC - 2,205

DHS - 6,750

DMH - 3,855

DPSS - 2,030

LASD - 5,000

Collaborative Total: 25.333

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MILESTONES	STRATEGIES/ACTIVITIES	LOCATION	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Partner: DPH/MCAH  Completed Applications Total: 8,000 (4,000/year)  Confirmed Enrollment Total: 6,000 (3,000/year)	<ul> <li>DPH/MCAH contracted agencies will conduct enrollment activities</li> <li>Contracted agencies will screen for Medi-Cal eligibility and also refer clients for other appropriate social services</li> <li>Contracted agencies will conduct enrollment verification and troubleshooting</li> </ul>	Across LA County's 8 SPAs	LEP and Mixed Status Families	July 2014- June 2016 July 2014- June 2016 Oct 2014 – June 2016	DPH/MCAH Contracted Agencies

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Partner: DPH/SAPC  Completed Applications Total: 2,940 (1,470/year)  Confirmed Enrollment Total: 2,205 (1,103/year)	<ul> <li>Initiate application assistance activities with patients screened as likely Medi-Cal eligible.</li> <li>Initiate Medi-Cal screening and application assistance activities for persons seeking admission to SUD services through CASC.</li> <li>Assist clients with and/or conduct enrollment activities, including enrollment verification</li> <li>Refer clients to appropriate SUD and ancillary services, as needed</li> </ul>	Each of the 8 DPH/SAPC's contracted Community Assessment Service Centers (CASCs)	Persons with Substance Use Disorder needs	By December 2014 – June 2016	DPH/SAPC Contracted Community Assessment Service Centers (CASCs)
Partner: DHS  Completed Applications Total: 9,000 (Year 1: 5,400; Year 2: 3,600)  Confirmed Enrollment Total: 6,750 (Year 1: 4,050; Year 2: 2,700)	Grantee's O&E workers will take a minimum of 75 applications per month for 24 months, with a goal of 75% of these resulting in a Medi-Cal enrollment	Across LA County's 8 SPAs	LEP, Mixed status families, Young Men of Color, an homeless individuals	By December 2014 – June 2016	DHS Contracted Grantees – CP and ICMS providers
Partner: DMH  Completed Applications Total: 5,140 (2,570/year)  Confirmed Enrollment Total: 3,855 (1,928/year)	<ul> <li>Conduct enrollment activities for existing DMH clients and individuals in the community and file reconsideration applications when applicable</li> <li>Conduct enrollment verification and troubleshooting</li> </ul>	Throughout the 8 LA County SPAs at DMH directly-operated and contracted programs and at community- based locations including: at locations that include CBOs serving under- represented ethnic populations; faith-based organizations, such as, churches, temples and mosques; National Alliance on Mental Illness (NAMI) chapters; transition-age youth (TAY) drop-in centers; emergency shelter programs; disabled student centers on community college campuses; and homeless shelters and encampments.	Persons with mental health disorder needs	August 2014 – June 2016 November 2014-June 2016	DMH contracted benefits establishment agencies

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Partner: DPSS  Completed Applications Total: 2,030 (1,015/year)  Confirmed Enrollment Total: 2,030 (1,015/year)	- At DPSS outreach and enrollment events, DPSS Staff via the Mobile Outreach Unit will conduct enrollment activities onsite, including eligibility screening and application submission	- Fiestas Patrias	Young Men of Color	Sept. 2014- June 2016	DPSS and DPSS Mobile Outreach Unit
Partner: LASD  Completed Applications Total: 20,000 (10,000/year)  Confirmed Enrollment Total: 5,000 (2,500/year)	<ul> <li>LASD will develop a questionnaire to screen for Medi-Cal eligibility within the intake process.</li> <li>LASD will collect and submit all necessary supporting documentation to DPSS for successful enrollment into Medi-Cal that will take effect upon the inmate's release.</li> </ul>	Enrollment activities will take place within 7 jail facilities across LA County	Incarcerated populations	July 2014 – June 2016	LASD Custody Assistants within the Community Transition Unit

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Fiscal Years 2014-2015 and 2015-2016

# **Activity 3 – Retention**

Activity 3: Identify major O&E retention activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you expect to re-enroll (i.e. Increase the number of targeted Medi-Cal enrollees who retain their Medi-Cal eligibility by X).

Retention is a service provided when we track an enrolled individual's re-application time line to Medi-Cal, and take all the available steps afforded by that individual towards their continued enrollment in, and their retention of, Medi-Cal.

**How to measure:** Two steps need to be completed in order to measure retention:

- 1. "Redetermination assistance" is defined as attempting to contact 100% of clients/beneficiaries (confirmed enrolled) and making successful contact with 65% of those clients/beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.
- 2. "Retention rate" is defined as the percentage of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins).

#### MILESTONE:

#### DESCRIPTION OF STRATEGY/ACTIVITY:

For each objective, list each partner separately and indicate the number of individuals that they plan to retain into Medi-Cal.

Describe below what and or how each partner plans on achieving their goals that are identified in the adjacent milestones. What methods/means will be used to achieve these goals and objectives?

#### **Redetermination Assistance:**

DPH/MCAH - 3,900 DPH/SAPC - 1,433 DHS - 4,388 DMH - N/A DPSS - 1,319 LASD - N/A

Collaborative Total: 11,040

MILESTONES	STRATEGIES/ACTIVITIES	LOCATION	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Partner: DPH/MCAH  Retention Activities  1. Redetermination Assistance Total: 3,900	<ol> <li>Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either in- person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.</li> </ol>	Across LA County's 8 SPAs	Limited English Proficient and Mixed status	June 2015 - ongoing	DPH/MCAH Contracted agencies
Retention Rate.	<ol> <li>Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins).</li> </ol>			June 2015 - ongoing	

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Fiscal Years 2014-2015 and 2015-2016

Partner: DPH/SAPC  Retention Activities  1. Redetermination Assistance     Total: 1,433  2. Retention Rate.	. Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either inperson or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.  2. Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins).  - Conduct planning meetings with DPSS personnel to complete arrangements for regional linkages between SAPC CASC contracted agencies and DPSS district liaisons	dise June 2015 - ongoing contracted agencies  By Sept. 2014
Partner: DHS  1. Redetermination Assistance Total: 4,388  2. Retention Rate.	<ul> <li>Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either inperson or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.</li> <li>Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins).</li> <li>DHS contracted O&amp;E workers will combine their outreach and enrollment efforts with aggressive retention/redetermination strategy</li> <li>DHS contractors will personally contact the Medi-Cal recipients that they enrolled twelve months prior by phone, in person or through any other inperson strategy to obtain submission of necessary redetermination paperwork within the redetermination period.</li> </ul>	Men ongoing agencies

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Fiscal Years 2014-2015 and 2015-2016

Partner: DMH  1. Redetermination Assistance 2. Retention Rate.	intake and annually thereafter to do an eligibility check for Medi-Cal benefits  - If there is an interruption in benefits, financial	At DMH directly- operated and contracted agencies located across LA County's 8 SPAs	Persons with mental health disorder needs	June 2015 - ongoing  June 2015 - ongoing  August 2014- June 2016  August 2014- June 2016  August 2014- June 2016  May 2015-June 2016	DMH directly- operated and contracted agencies
Partner: DPSS  1. Redetermination Assistance Total: 1,319 2. Retention Rate.	<ul> <li>DPSS staff will conduct re-determination activities with target population prior to re-determination date.</li> <li>DPSS staff will follow-up with enrollees to ensure any pending terminations are valid</li> </ul>	Across LA County's 8 SPAs	Young Men of	April 2015-June 2016 April 2015-June 2016	DPSS Staff (Eligibility Workers and Mobile Outreach Unit Staff)

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DESCRIPTION OF ACTIVITY

MILESTONE:

### LOS ANGELES COUNTY MEDI-CAL OUTREACH & ENROLLMENT WORK PLAN

Fiscal Years 2014-2015 and 2015-2016

# **Activity 4 – Tracking and Reporting**

Activity 4: Identify your intent and list the AB 82 population groups that you will contract to target. Identify for each targeted group, how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients in XXX County who receive outreach, education and information regarding the AB 82 targeted populations (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency).

Reginning & Ending Dates:

For each objective, list each partner separately and indicate the number of	their goals that methods/mean objectives?	what and or how each partner plan are identified in the adjacent milest s will be used to achieve these goals	ones. What	<b>0</b>   <b>1</b>				
Completed Applications:  DPH/MCAH - 8,000 DPH/SAPC - 2,940 DHS - 9,000 DMH - 5,140 DPSS - 2,030 LASD - 20,000 Collaborative Total: 47,11	0	Confirmed Enrollment:  DPH/MCAH - 6,000  DPH/SAPC - 2,205  DHS - 6,750  DMH - 3,855  DPSS - 2,030  LASD - 5,000  Collaborative Total: 25,840		DPH/MCAH - 3,900 DPH/SAPC - 1,433 DHS - 4,388 DMH - N/A DPSS - 1,319 LASD - N/A Collaborative Total: 1				
QTD/	ATECIES/AC	TIVITIES	LOCATION	TARGET	TIME! INE	WHO IS		

STRATEGIES/ACTIVITIES	LOCATION	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
<ul> <li>Activities: <ul> <li>Within DPH/MCAH, the CHOI Unit has maintained an on-line database for tracking and reporting health coverage outreach, enrollment, utilization and retention for over 12 years. DPH/MCAH has offered access for each Department to use the CHOI database for tracking of outreach information. Outreach can be tracked and reports generated by agency/dept. conducting the outreach, client, event, location in LA County (city, zip code, and SPA). Departments will also be tracking target population outreached to.</li> <li>Departments who do not use the CHOI database will be tracking outreach numbers using the same data collection fields listed above from an alternate database/data collection format.</li> <li>All Departments, regardless of database/data collection system used, will report outreach numbers to the DHCS Grant Project Manager on a regular basis. The Research Analyst will then collect and aggregate the outreach data to include in quarterly progress report to DHCS and the County Board of Supervisors.</li> </ul> </li> </ul>	contracted community	<ul> <li>DPH/MCAH: LEP and Mixed Status Families</li> <li>DPH/SAPC: Persons with Substance Use Disorder needs</li> <li>DMH: Person with Mental Health Disorder needs</li> <li>DHS: LEP, Mixed-status families, Young Men of Color and Homeless</li> <li>DPSS: Young Men of Color</li> <li>LASD: Incarcerated population</li> </ul>	July 2014- June2016	All Departments (DPHMCAH, DPH/SAPC, DMH, DHS, DPSS, and LASD)

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Fiscal Years 2014-2015 and 2015-2016

Tracking and Reporting Strategy #2: Use of the DPH/MCAH CHOI Database for tracking and reporting Application Assistance, Enrollment and Retention Activity  Activities:  - DPH/MCAH CHOI Database users will be tracking applications submitted, enrollments verified, troubleshooting assistance provided, renewal/redetermination assistance offered and provided, and successful retention in Medi-Cal after 1 year.	Online database accessible by each CHOI Database Department /Subcontractor user throughout LA County	DPH/MCAH: LEP and Mixed Status     DHS: LEP, Mixed-status families and Homeless     DMH: Persons with Mental Health Disorder needs; subcontractor Mental Health Advocacy Services has target of 2,570 enrollments	August 2016	DPH/MCAH, DHS and DMH, including DMH's subcontractor Mental Health Advocacy Services (the first of DMH's 2 subcontractors) are using the CHOI Database
Tracking and Reporting Strategy #3: Use of DPH/SAPC Database for tracking and reporting Application Assistance, Enrollment and Retention Activity  Activities: - DPH/SAPC contracted CASC agencies will use CHOI database to track applications submitted, enrollments verified, renewal/redetermination assistance offered and provided, and successful retention in Medi-Cal after 1 year	Database will be accessible by each of DPH/SAPC's 8 contracted CASC agencies, located in each SPA in LA County	- DPH/SAPC: Persons with Substance Use Disorder needs	July 2014- August 2016	DPH/ SAPC
Tracking and Reporting Strategy #4: Use of DPSS's LEADER system  Activities:  - DPSS and LASD will use DPSS's LEADER system to track applications submitted and enrollments verified. DPSS will also use LEADER to track renewal/redetermination assistance offered and provided, and successful retention in Medi-Cal after 1 year.	LEADER is accessible County-wide by DPSS staff – Eligibility Workers and the Mobile Outreach Unit. LASD Custody Assistants in County jail complexes will work closely with DPSS to facilitate tracking reporting	<ul> <li>DPSS: Young Men of Color</li> <li>LASD: Incarcerated populations</li> </ul>	July 2014- June 2016	DPSS and LASD

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Fiscal Years 2014-2015 and 2015-2016

Tracking and Reporting Strategy #5: Use of DMH Contracted Agency's data collection system  Activities:  - DMH's second subcontractor, Health Advocates, will be will using their own database to track applications submitted, enrollments verified and renewal/redetermination assistance offered	Health Advocates' database is accessible to all contracted staff on this grant working with clients in areas across LA County.	- DMH: Persons with Mental Health Disorder needs; subcontractor Health Advocates has target of 2,570 enrollments	– June 2016	DMH and DMH's subcontractor Health Advocates (the second of DMH's 2 subcontractors)
<ul> <li>Tracking and Reporting Strategy #6: Collecting and Aggregating Data across Departments, reporting to DHCS and LA County Board of Supervisors</li> <li>Activities:         <ul> <li>The DHCS Project Manager, housed at DPH/MCAH, will collect outreach, application assistance, enrollments and re-determination and renewal data from each Department. The Research Analyst will then analyze, combine, and aggregate the data to include in quarterly progress report to DHCS and the County Board of Supervisors.</li> </ul> </li> </ul>	Data will be collected across LA County and reported on at the County and target population level	DPH/MCAH: LEP and Mixed Status Families     DPH/SAPC: Persons with Substance Use Disorder needs     DMH: Person with Mental Health Disorder needs     DHS: LEP, Mixed-status families, Young Men of Color and Homeless     DPSS: Young Men of Color     LASD: Incarcerated population	– June 2016	Each Dept. (DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS and LASD) is responsible for collecting within their Dept. the target population deliverable data and submitting it to the DHCS Project Manager. The DHCS Project Manager is responsible for collecting, analyzing and aggregating the data for DHCS and LA County Supervisors.

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# 1. Indicators or benchmarks County used to meet the objectives, as described in Work Plan. List County's accomplishments and progress to date.

### DPH/MCAH:

Outreach: DPH/MCAH provided outreach activities to 4,879 individuals.

Enrollment: 768 persons were assisted with completing Medi-Cal applications of which 129 individuals were successfully enrolled.

### DPH/SAPC:

Outreach: DPH/SAPC provided outreach activities to 379 individuals.

Enrollment: 7 persons were assisted with completing Medi-Cal applications of which 4 individuals were successfully enrolled.

### DHS:

Outreach: DHS provided outreach activities to 807 individuals.

Enrollment: 53 persons were assisted with completing Medi-Cal applications. Confirmed enrollment number is not reported at this time.

### DMH:

Outreach: DMH provided outreach and in-reach activities to 1,321individuals.

Enrollment: 51 persons were assisted with completing Medi-Cal applications of which 13 individuals were successfully enrolled.

### **DPSS**:

Outreach: DPSS did not report any outreach numbers for the first quarter.

Enrollment: DPSS did not report any enrollment numbers for the first quarter.

# Sheriff's:

Outreach: Sheriff's Department provided in-reach activities to 2,845 inmates.

*Enrollment:* 2,845 persons were assisted with completing Medi-Cal applications of which 379 individuals were successfully enrolled. Additional 426 applications have been cleared by DPSS and are on hold until applicants' release date.

COLLABORA (All Department		FY 2014-2015 Annual Target Numbers/Goals	Quarter 1 07/01/14- 09/30/14	Quarter 2 10/01/14- 12/31/14	Quarter 3 01/01/15- 03/31/15	Quarter 4 04/01/15- 06/30/15	FY 2014-2015 Year To Date Numbers
Outreach		52,880	10,231	-	-	-	10,231
Enrollment	Completed 24,455 3,724 Applications	3,724	-	-	-	3,724	
Enrollment	Confirmed Enrollment	13,596	525	-	-	-	525
Retention	Redetermination Assistance	5,371	N/A <sup>**</sup>	-	-		-

<sup>\*\*</sup> Redetermination assistance is provided at the time of annual eligibility review/renewal. None to report for Quarter 1

2. List community-based organizations (CBOs), including current sub-contractors, other community organizations and faith-based organizations (FBOs) that the County partnered with to accomplish grant objectives.

### DPH/MCAH:

- Asian Pacific Health Care Venture, Inc. (SPA 3&4)
  - o Partnering with AHMC Health Foundation, Korean Health Education and Research Center (KHEIR), Rosemead and Mountain View School Districts
- Child and Family Guidance Center (SPA 2)
  - Partnering with Our Lady of Peace Church, Santa Rosa Church, Maria Inmaculada Church, San Luis Obrero Church, Park Parthenia
    Apartment, Pals Youth Center, Aurora Medical Center, Kids & Teen Medical Group, Northridge Hospital Medical Center, Superior
    Supermarkets, Schools, Best Start Panorama City, Best Start Pacoima, California State University, Northridge, Pierce College, Valley College,
    and Mission College
- Citrus Valley Health Partners (SPA 3)
  - o Partnering with Family Birth & Newborn Center, Promotoras de Salud, Welcome Baby Program
- City of Long Beach (Citywide)
- City of Pasadena Public Health Department (Citywide)
- Partnering with the City of Pasadena Human Services and Recreation Department, Chapcare, Women, Infants and Children (WIC) -Pasadena
- Community Health Councils, Inc. (SPA 6&8)
  - Partnering with Watts Labor Community Action Committee (WLCAC), Southeast Crenshaw Worksource, South LA Worksource, Inglewood Business and Career Center, Gardena Business and Career Center, Torrance Career Center, South Bay Beach Cities Career Center, Carson South Bay Career Center, St. Margaret Center, CADRE, Community Career Development, LA South/Compton Workforce/Employment Development Department (EDD), LA Crenshaw EDD, Housing Authority: Imperial Courts, Nickerson Gardens, and Jordan Downs
- Computer Therapy LLC (Countywide)
- Crystal Stairs, Inc. (SPA 8)
- Dignity Health dba California Hospital MC (SPA 4&6)
- Human Services Association (SPA 7)
  - o Partnering with WIC Bell Garden, WIC South Gate, Tri-Cities Head Start, various clinics throughout SPA 7, City of South Gate, City of Whittier, Congresswoman Linda Sanchez Office, Rio Hondo Community College
- Los Angeles Unified School District (Schools)
  - o Partnering with Early Childhood Linkages to Wellness (ECLW)
- Maternal and Child Health Access Outreach (SPA 3,4,6&7)
  - o Partnering with Neighborhood Legal Services, Alliance for Children's Rights, Jovenes Inc., ELA Women's Center, Worksite Wellness LA
- Maternal and Child Health Access Training (Countywide)
- Northeast Valley Health Corporation (SPA 2)
  - o Partnering with Women, Infants and Children (WIC)
- St. Francis Medical Center of Lynwood (SPA 7)
  - o Partnering with Montebello, Los Nietos/Whittier, and EL Rancho Unified School Districts, Pediatric and OB/GYN offices

- Valley Community Clinic (SPA 2)
  - o Partnering with Child and Family Guidance, LAUSD schools, Coalition for Humane Immigrant Rights of Los Angeles (CHIRLA), Child Care Resource Center (CCRC) Head Start sites, local churches
- Venice Family Clinic (SPA 5)

### **DPH/SAPC:**

- Behavioral Health Services (SPA 8)
- California Hispanic Commission on Alcohol Drug Abuse (SPA 7)
- Didi Hirsch Community Mental Health Center (SPA 5)
- Homeless Health Care (SPA 4)
- Prototypes (SPA 3)
- San Fernando Valley Community Mental Health Center (SPA 2)
- Special Service for Groups (SPA 6)
- Tarzana Treatment Centers (SPA 1)

### DHS:

- AltaMed Health Services Corporation (SPA 4)
- o Partnering with the East Los Angeles Sheriff Station, Federacion Zacatecana, Primer Amor Christiano Church, Universal Church, and Resurrection Catholic Church
- Bartz-Altadonna Community Health Center (SPA 1)
  - o Partnering with the Grow Program, Grace Resource Center, Homeless Solutions Access Center, Lancaster Community Shelter, Lake Los Angeles Community Church, St. Vincent de Paul, Salvation Army, Antelope Valley Rescue Mission, and First Assembly of God
- Chinatown Service Center (SPA 3)
  - o Partnering with County libraries, schools, child care centers, and managed care plans
- Clinica Monsenor Oscar A. Romero (SPA 7)
  - o Partnering with The Mexican Consulate's Ventanilla de Salud, The Wall Las Memorias, and St. Francis Center
- Mission City Community Network, Inc. (SPA 8)
- Samuel Dixon Family Health Center (SPA 2)
  - o Partnering with local educational institutions, community service centers, recreational parks and recreation organizations, and FBOs
- University Muslim Medical Association (UMMA) Community Clinic (SPA 6)
  - o Partnering with Strategic Concepts in Organizing Policy and Education (SCOPE), the Salvation Army, Los Angeles Conservation Corp Coalition of Mental Health Professionals, Homeless Projects, and City Young of South Los Angeles.

### DMH:

- Health Advocates
- Mental Health Advocacy Services

# DPSS:

• Partnering with Young Invincibles

# Sheriff's:

N/A

3. List of specific activities that were completed for the project by Department/sub-contractors/CBOs/FBOs. Describe the role of each sub-contractor/CBO/FBO and what they do for the project.

### DPH/MCAH:

DPH/MCAH, the Lead Department/Division on the DHCS grant, contracted with 17 agencies on this project. All contracted agencies reached out to collaborative partners and partnered with new agencies in the community to make them aware of the services. Agency staff attended number of trainings that included: CHOI Forms training, "We've Got You Covered" training, YBN training, Medi-Medi Connect training, and Covered CA Outreach and Education training. Agencies were trained to use CHOI database system to capture their outreach and enrollment work.

DPH/SAPC:

DPH/SAPC contracted with eight Community Assessment Service Centers (CASC) for this project. Contracts were executed in mid-July. By August, all eight CASC hired Medi-Cal Outreach and Enrollment (O&E) Specialists to lead the project. Each CASC is responsible for conducting outreach activities with patients currently enrolled and/or those individuals seeking admissions to Substance Use Disorder (SUD) treatment services, screening these patients for Medi-Cal eligibility, and assisting them with application. Some CASC conducted outreach at community events and community colleges. CASC staff completed three trainings: "We Got You Covered" training, CHOI Forms training, and CHOI "Hands On" database training. Three of the five CASC contractors completed YBN trainings. DPH/SAPC coordinated monthly grant orientation meetings during the months of July, August, and September. DPH/SAPC established a billing system to capture grant activities and expenditures. DHS:

In the first quarter, contracted CBOs focused on obtaining an executed contract with DHS for this grant and hired their enrollment staff. Contracted CBOs received trainings including: a) Orientation on grant deliverables, rules and responsibilities, b) Orientation on invoicing, billing and grant reporting, and c) CHOI "Hands On" database training. Chinatown Service Center reported 53 Medi-Cal completed applications. UMMA Community Clinic reported outreach to 245 individuals through the distribution of materials, tabling, and direct person-to-person contact. Working with their community partner SCOPE, UMMA hosted an enrollment fair to provide enrollment services to community residents. Bartz-Altadonna Community Health Center reported 562 outreach activities.

### DMH:

During the first quarter, DMH's subcontractors, Health Advocates, LLC and Mental Health Advocacy Services, Inc., successfully engaged a variety of service providers across all eight SPAs, including providers of Specialty Mental Health Services (SMHS), CBOs, FBOs, Shelter Care providers, Disabled Student Centers on community college campuses, and local National Alliance on Mental Illness (NAMI) chapters. In total, the subcontractors contacted 345 agencies, which resulted in the formation of 390 new collaborations for in-reach and outreach activities. Subcontractors conducted 13 in-reach activities to 86 existing mental health clients and 81 outreach activities at CBOs, FBOs, Shelter Care programs, and Disabled Students Centers to 1,235 clients. DMH's subcontractors conducted nine Medi-Cal eligibility and benefits establishment presentations and trainings.

# **DPSS**:

DPSS connected with Young Invincibles agency for dialogue on marketing strategies to outreach and contact young men of color (YMOC). DPSS also coordinated YBN training for DPH and DHS scheduled on November 6, 2014.

### Sheriff's:

Five (5) full time custody assistants completed the following functions:

- Contacted the jail population and provided in-reach activities to 2,845 inmates
- Assisted 2,845 inmates by completing applications for those who stated they wished to receive Medi-Cal coverage
- Submitted the applications to DPSS to determine if the individuals already had coverage or an application in process

- Applications submitted were entered into the YBN system
- The YBN was monitored to determine if the applications were processed by DPSS. 379 applicants were confirmed as newly enrolled
- In addition to newly enrolled applicants, 426 of the DPSS cleared applications are on hold until applicants' release dates are within the required 45 day time frame. Benefits will be activated upon release from custody/coordinated with DPSS.
  - 4. Any innovative strategies/practices that were successful and can serve as a model for others or that County can build upon.

### DPH/MCAH:

- <u>Computer Therapy LLC</u> held CHOI webinar trainings via GoTo meeting interface. These proved successfully and beneficial when assisting
  agencies and departments.
- <u>Community Health Councils (CHC)</u> launched its "Know Your Digits! Be in Control" Campaign and brought attention to hypertension in adults within African-American and Latino communities. Participants were able to get their blood pressure checked; healthcare options were offered to uninsured attendees.
- Northeast Valley Health Corporation (NVHC) staff connected with Health Centers' referral nurses to get in touch with any newborn patients and their parents and screen them for healthcare coverage.
- The Long Beach Department of Health and Human Services (LBDHHS) adopted and implemented a "Health in All" policy. This policy allows LBDHHS to be considered in all development throughout the city and partners with many non-traditional entities to assist with health insurance enrollment.
- Venice Family Clinic partnered with My Health LA program for Medi-Cal outreach and enrollment.
- <u>Asian Pacific Health Care Venture, Inc. (APHCV)</u> partnered with the Garfield Hospital to target Emergency Room patients. APHCV also conducted workshops inside local schools and partnered with the AHMC foundation to assist local library visitors with insurance coverage.
- Valley Community Clinic set up information booth in the clinic's lobby to answer any questions related to healthcare coverage.

### **DPH/SAPC:**

DPH/SAPS reported that SUD clients are hard to reach due to their addiction and other social determinants. DPH/SAPC implemented on innovative approach reaching out to SUD clients at the treatment facilities by using a web portal to assist clients with applying for Medi-Cal on site. This one stop shop model/approach was successful in obtaining Medi-Cal and other primary care services.

### DHS:

Without the capability to enroll Medi-Cal applicants through the YBN system (until the YBN training on November 6, 2014), most of the CBOs spent the first quarter focusing on developing and implementing their outreach strategies. Outreach activities included distribution of flyers to churches, schools, homeless shelter, institutions and businesses; education to individuals and discussion with them about their healthcare needs; working with various local community partners.

- <u>Bartz-Altadonna agency</u> demonstrated a unique approach of providing food, clothing and hygiene products to the homeless. These approach triggered homeless population to more actively discuss health care needs.
- <u>UMMA's</u> outreach was conducted in a wide variety of locations such as: Ascot Library, Edison Middle School Magic Johnson Park, Mt. Carmel Park, Homeless Projects, Superior Market, El Tapatio Market, Bilal Islam Center, First Christian Church, Coalition of Mental Health Professional, LA Conservation Corps, San Pedro St. Swap Meet, local churches and mosques, and the Salvation Army.

### Sheriff's:

The initial practice of screening inmates prior to being cleared by DPSS proved time consuming and inefficient. Same problem arose when relocating the inmates on the following day after in-reach to complete an application. It was then determined that an application should be completed upon the first contact with the inmates. In addition, Sheriff's has collaborated with DPSS team members for expedited screenings (same day) of the inmates for entry into the YBN. Due to these efforts an immediate improvement in the process was realized.

### DMH:

None to report at this time.

### **DPSS**:

None to report at this time.

5. Any project activities/successes that were not identified in the Work Plan, but are a "spin-off" of Work Plan activities.

### **DPH/MCAH:**

- Maternal and Child Health Access (MCHA), training agency, suggested and facilitated YBN trainings in partnership with DPSS and DPH. User agreement forms were collected from 50 individuals and mailed to DPSS for creation of YBN accounts.
- APHCV enrollment worker regularly passed out flyers at shops, grocery stores, and hospitals. As time passed, the agency visibility in the community improved and, resultantly, increased number of submitted applications.

### **DPH/SAPC:**

DPH/SAPC's original plans did not include using DPSS YBN web portal to process Medi-Cal applications and utilizing CHOI database system to track outreach and enrollment assistance. However, during the first month DPH/SAPC decided to use both services.

### DHS:

None to report at this time.

### DMH:

None to report at this time.

### **DPSS**:

None to report at this time.

# Sheriff's:

None to report at this time.

6. List project activities not completed during the quarter that were stated to be completed. If the activities completed differ from County's proposal, what caused these changes? Were activities delayed and if so, why? Will these activities be completed? When and how? Are there any activities County will not be able to complete during the course of this grant?

### **DPH/MCAH:**

Contracted agencies experienced time delays in hiring outreach and enrollment staff. As a result, some agencies reported lower than expected Q1 outreach and enrollment numbers. Also some Medi-Cal applications took longer than 45 days to process which also impacted target numbers.

# **DPH/SAPC:**

During the first quarter, four of the eight CASC did not complete the YBN web portal training due to DPSS limited staffing and resources. The YBN training took place on November 6, 2014. Since training has been completed, each of the contracted CASC is expected to receive their user access to the YBN system and will be able to begin enrollment.

### DHS:

All of the CBOs, except for Chinatown Service Center, were unable to begin Medi-Cal application enrollments during the first quarter because of DHS's extensive solicitation process and the time needed to execute contracts with the grantees. In addition, none of the CBOs had prior access to DPSS YBN system to enroll applicants into Medi-Cal. DPSS was able to offer a YBN training on November 6, 2014. After the training was completed each of contracted CBO is expected to receive their user access to the YBN system and will be able to begin enrollment.

### **DPSS**:

Outreach activities were delayed due to prior commitments involving the DPSS Outreach District and Mobile Office during most of the 1st quarter. All YMOC related outreach activities will commence in October 2014. Activities below will be completed within the grant period:

- DPSS will develop a calendar of outreach and enrollment events
- DPSS will partner with CBOs, non-profits and other county agencies to outreach to YMOC through print media and other marketing channels
- DPSS will partner with county departments to provide on-site workshops specifically geared towards youth
- At DPSS outreach and enrollment events, DPSS staff via the Mobile Outreach Unit will conduct enrollment activities onsite, including eligibility screening and application submission.

### DMH:

None to report at this time.

#### Sheriff's:

None to report at this time.

# 7. List any products developed, data sources and/or resources used

### DPH/MCAH:

All DPH/MCAH contracted agencies are using CHOI database system to track outreach, enrollment, and retention activities. Contracted agencies created flyers, pamphlets, post cards, outreach calendars, and press releases to inform target populations about insurance coverage. Also APHCV created in many different languages a checklist of documents needed to enroll in Medi-Cal. Community Health Councils developed presentation on the healthcare coverage to be used for outreach purposes.

# **DPH/SAPC:**

DPH/SAPC developed the CASC Medi-Cal O&E Assistance (MOEA) directory; project fact sheets that outlined goals and objectives; statement of Work Contract which outlines funding regulations; audit tools for compliance purposes; County directory of State Certified Enrollment organization in order to establish collaborative efforts. To assist CASC with Medi-Cal outreach and enrollment activities, DPH/SAPC provided Centers with following resources/publications: State of Enrollment, Lessons Learned from Connecting American to Coverage, 2013-2014 State Plan Amendment 13-038, and Drug Medi-Cal Waiver Update.

# DHS:

CBOs are using the CHOI database to track submitted applications and then follow clients through the utilization and redetermination process. Through a partnership with DPSS, the YBN system will be used to enroll individuals into Medi-Cal. UMMA Community Clinic created outreach logs to track the success of the efforts of their enrollment coordinators from general outreach (distribution of materials and/or tabling), direct outreach (phone calls, in-person longer than 5min, and/or email), and enrollment appointments.

### DMH:

DMH developed a master database of in-reach/outreach targets to support subcontractors' efforts. The database includes contact information for agencies and organizations across all eight SPAs and delineated by agency/organization type, including SMHS providers (DMH directly-operated

and contracted), CBOs, FBOs, Shelter Care providers, Disabled Student Centers on community college campuses, and local NAMI chapters. Health Advocates, LLC and Mental Health Advocacy Services, Inc, developed Medi-Cal training materials/curriculum and promotional materials in both English and Spanish. In addition, Health Advocates, LLC customized intake instrument specifically for this project.

### DPSS:

None to report at this time.

### **Sheriff's:**

None to report at this time.

### 8. Any challenges/barriers encountered and proposed solutions.

### DPH/MCAH:

- <u>Computer Therapy LLC</u> adapted CHOI database system for use by Sheriff's department for their outreach and enrollment tracking. Two additional trainings were conducted for Sheriff's staff.
- <u>LAUSD</u> experienced internal budget setbacks that delayed activities in Q1. Budget modification will be submitted to DPH/MCAH to optimize SOW and meet annual target numbers.
- <u>Northeast Valley Health Corporation</u>, among other agencies, experienced delays in processing applications due to extended Medi-Cal backlog. Agency staff facilitated "emergency cases" by contacting their DPSS liaisons for assistance.
- Venice Family Clinic filed "case complaints" on behalf of clients and reported issues directly to Medi-Cal program.
- <u>APHCV</u> provided case worker's contact information to clients in order to conduct the follow-up of status. In addition, APHCV used phone interpreter in the event an enrollment worker is experiencing language barrier with the client.
- <u>Citrus Valley Health Partners</u> staff discovered that families and individuals, after having completed an application, believe that they are uninsured, as they have received no confirmation or follow up communication from the state Medi-Cal. Clients attempting to contact the state Medi-Cal office via telephone have reported substantial delays in eligibility workers answering the phone. Agency staff assisted by dialing the phone number, allowing clients to connect directly with the eligibility worker and by coaching the client regarding the appropriate verbiage to be used in conversations with the eligibility worker to ensure that the appropriate actions are taken.

### **DPH/SAPC:**

Originally, DPH/SAPC did not anticipate using the CHOI database system for tracking and reporting activities. However, after examining the benefits of the data system, DPH/SAPC decided to use the system in order to be consistent with reporting activities. Also, DPH/SAPC initially did not plan on using the YBN web portal but then learned that the YBN was a unique system for assisting SUD clients. Therefore, both these decisions to use CHOI data and YBN systems caused a delay. The YBN training took place on November 6, 2014 while the CHOI data system trainings took place in September – October, 2014.

### DHS:

The lack of access to the YBN web portal until early November was a challenge in beginning first quarter activities. Many of CBOs have actually begun doing Medi-Cal outreach and enrollments, although few of these outreach and enrollment efforts can be reported as part of this grant. In addition, the processing time for Medi-Cal applications is still longer than expected. Also, a couple CBOs reported that some establishments will not allow them to do outreach on their premises. Finally, some CBOs reported a challenge in hiring an enrollment counselor that would meet their qualifications and expectations for this grant. However, all grantees now have enrollers on board.

### DMH:

Both DMH subcontractors reported that numerous target agencies they contacted to offer Medi-Cal O&E Services declined, stating that they had already been contacted by multiple entities offering similar services; thus, Medi-Cal O&E market saturation has emerged as an early challenge that could potentially impact achievement of enrollment target numbers. DMH brought this issue to the attention of collaborative Work Group. The Work Group jointly decided to discuss this outreach overlap dilemma at Everyone on Board meeting and find solution to resolve the issue.

### **Sheriff's:**

Challenges were experienced in tracking the personnel activities on the grant which were resolved through collaborative efforts. The initial practice of tracking applications and the related demographic information involved an Excel spreadsheet and several hours of design and data input. As of October 1, 2014, Sheriff's began utilizing CHOI database system which will improve personnel efficiency and simplify the monthly and quarterly reporting process. CHOI team has assisted department in making their tracking system meet the needs of both organizations.

### DPSS:

None to report at this time.

9. State if Department/sub-contractors/other partnering organizations received funding from other foundations, corporations or government bodies for the Medi-Cal O&E efforts currently supported by this grant. If so, provide funder's name, the amount of funding provided, and when it was provided. If the support is in-kind and can be estimated in \$, please provide the figure.

### DPH/MCAH:

- <u>LAUSD</u> currently receives funds from the Centers for Medicaid and Medicare Services, Children's Health Insurance Program Re-Authorization Act, Cycle III. Funding amount of \$976,000 was provided on 8/1/2013. Funding term is over on 6/30/2015.
- Northeast Valley Health Corporation currently receives funds from CHIPRA (\$310,493 for FY 2014-2015, funding was provided on 07/01/2013) and HRSA (\$463,444 for FY 2014-2015, funding was provided on 07/15/2013).
- <u>Venice Family Clinic</u> currently receives funds from HRSA (\$166,789 for FY 2014-2015, funding was provided on 07/01/2013). APHCV also receives funds from HRSA (\$71,713 for FY 2014-2015, funding was provided on 08/15/2014).
- <u>DPH/MCAH</u> receives \$4.6 million for outreach and enrollment services provided by our local First organization (First 5LA) with the target population of families with children ages 0-5. The First 5LA funding provides the bulk of infrastructure and overhead costs enabling the 17 CBOs schools, and clinics to provide additional services to an expanded target population using the smaller amount of DHCS funding (\$700,000 per year). Leveraging each funding source creates synergy for both outreach and enrollment projects. DPH/MCAH provides inkind support from a total of 2.5 FTE staff whose salaries are not covered by this grant (positions include Research Analyst III, Staff Analysts, Accounting Tech, and Intermediate Clerk).

### DHS:

Clinica Monsenor Romero (CMR) currently receives funds from the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) to provide outreach and enrollment services. During July 1, 2014 to September 30, 2014, HRSA provided CMR with \$59,928 in funding for these efforts, \$179,785 from October 1, 2014 to August 31, 2015 and thereafter on an ongoing basis.
 CMR is subcontracted by Asian Americans Advancing Justice to provide ACA education and enrollment services in the Boyle Heights neighborhood of Los Angeles. Total granted funds are \$50,000 for work performed during February 1, 2014 to January 31, 2015.

# **DPH/SAPC:**

None to report at this time

DMH:

None to report at this time

DPSS:

None to report at this time

Sheriff's:

None to report at this time

### 10. Describe whether DPH/MCAH assisted or failed to assist Departments in any way during this time period.

# DPH/SAPC:

DPH/MCAH has been extremely helpful during the first quarter.

### DHS:

DHS has received all the assistance requested from DPH/MCAH on a regular basis and in a timely way.

### DMH:

DPH/MCAH has been supportive of DMH and its subcontractors on many levels and provided technical assistance to DMH during the development phase of this program and assisted in formulating DMH Work Plan. DPH/MCAH served as an intermediary between the collaborative and the State when Work Group members had programmatic questions requiring feedback from the State. By allowing DMH subcontractors to access existing CHOI tracking system, DPH/MCAH effectively eliminated the cost of developing a separate DMH data system.

# **DPSS**:

DPH/MCAH assisted the DPSS with coordinating regular conference calls for project updates, deadlines, and guidance and responded promptly to all inquiries.

# Sheriff's:

DPH/MCAH was extremely helpful in extracting the required reporting data out of our tracking spreadsheet. We are looking forward to working with CHOI for future reporting periods.

### 11. Any other aspect of the project to share pertaining to this Medi-Cal O&E initiative.

# **DPH/SAPC:**

DPH/SAPC notified CASC providers about the Board of Supervisors recommendation to complete 10% above the projected outreach and enrollment numbers and also to reach out to the faith-based communities in their SPAs.

# DPSS:

DPSS has increased their annual target numbers by 10%.

# **DPH/MCAH:**

Not at this time.

DHS:

Not at this time.

DMH:

Not at this time.

Sheriff's:

Not at this time.

# Outreach, Enrollment, and Retention Summary County: LOS ANGELES

Reporting Period: July 1, 2014 to: September 30, 2014

Major Deliverables and Activities	AB 82 Target Population Reached	Materials	Staff and/or CBO's Used	Performance Measures and Data Collection	Status
Include reference to the major outcome objectives indicated in your work plan	Specify target audience	Specify all materials developed, finalized, or distributed (radio/TV/print ads; brochures, flyers, etc.) using allocation funds	Indicate staff responsible and/or CBO's used	Provide achievements, percentages, and numbers for the quarter and YTD that document achievements.	Indicate the completion date. If not completed, indicate the projected completion date. Provide a reason if date is different than on the approved work plan.
Outreach	<ul> <li>Families of mixed-immigration status</li> <li>Persons with limited English proficiency</li> <li>Persons with substance use disorder needs</li> <li>Persons who are homeless</li> <li>Young men of color</li> </ul>	<ul> <li>Checklist of documents needed to enroll in Medi-Cal in many different languages</li> <li>Flyers, pamphlets, post card, outreach calendars, press releases</li> <li>PowerPoint presentation on the healthcare coverage</li> </ul>	LA County Departments  Contracted and subcontracted agencies	Outreach and in-reach activities were provided to 10,231 persons. This number indicates 19.4% of the Collaborative annual target	On track
Enrollment	<ul> <li>Persons with mental health disorder needs</li> <li>Persons who are in county jails, county probation, or under post release community supervision</li> </ul>	<ul> <li>Log to track the success of the efforts of enrollment coordinators</li> <li>CHOI webinar training using GoTo meeting future to assist departments and agencies</li> </ul>	UMMA Community Clinic Computer Therapy LLC	3,725 persons were assisted to complete Medi-Cal applications, or 15.2% of the Collaborative annual target  525 applicants were confirmed as newly enrolled, or 3.9% of the Collaborative annual target	On track
Retention	·	N/A		N/A	On track

# **List of Common Acronyms**

**CASC** – Community Assessment Service Center

**CBO** – Community-Based Organization

**CHOI** – Children's Health Outreach Initiatives

**DHCS** – California Department of Health Care Services

**DHS** – Department of Health Services

**DMH** – Department of Mental Health

**DPH** – Department of Public Health

**DPSS** – Department of Public Social Services

**FBO** – Faith-Based Organization

MCAH - Maternal, Child, and Adolescent Health

MCHA - Maternal and Child Health Access

**MOU** – Memorandum of Understanding

**O&E** – Outreach and Enrollment

**SAPC** – Substance Abuse and Prevention Control

**SMHS** - Specialty Mental Health Services

SPA - Service Planning Area

**SUD** – Substance Use Disorder

YBN - Your Benefits Now!

**YMOC** – Young Men of Color

#### California Department of Health Care Services

#### LOS ANGELES COUNTY MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-2015

#### **DATA SUMMARY**

FY 2014-2015 Annual Target Numbers\*

		DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH		6960	10000	9520	7200	15000	4200	52880
ENROLLMENT	Completed Application	1015	10000	2570	5400	4000	1470	24455
LINICOLLIVILINI	Confirmed Enrollment	1015	2500	1928	4050	3000	1103	13596
RETENTION	Redermination Assistance	660	N/A	TBD**	2194	1800	717	5371

Quarter 1 (July, 2014 - September, 2014)

		DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH		0	2845	1321	807	4879	379	10231
ENROLLMENT	Completed Application	0	2845	51	53	768	7	3724
LINICOLLIMILINI	Confirmed Enrollment	0	379	13	0	129	4	525
RETENTION	Redermination Assistance	0	0	0	0	0	0	0

#### FY 2014-2015 Year to Date Numbers

		DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH		0	2845	1321	807	4879	379	10231
ENROLLMENT	Completed Application	0	2845	51	53	768	7	3724
LINICOLLINICIA	Confirmed Enrollment	0	379	13	0	129	4	525
RETENTION	Redermination Assistance	0	0	0	0	0	0	0

FY 2014-2015 Year to Date Completion, %

		DPSS	SHERIFF'S_	DMH _	DHS	DPH/MCAH_	DPH/SAPC_	Total _
OUTREACH		0.00	28.45	13.88	11.21	32.53	9.02	19.35
ENROLLMENT	Completed Application	0.00	28.45	1.98	0.98	19.20	0.48	15.23
LINICOLLINICITY	Confirmed Enrollment	0.00	15.16	0.67	0.00	4.30	0.36	3.86
RETENTION	Redermination Assistance	0.00	N/A	TBD**	0.00	0.00	0.00	0.00

<sup>\*</sup> Annual target numbers based on the 2014--2016 Work Plan

**Outreach** is a service provided when we raise an indivi-dual's awareness understanding of what is Medi-Cal and what can be done to enroll.

**Enrollment** is measured as the number of approved Medi-Cal applications resulting from Medi-Cal outreach and application assistance efforts.

**Completed applications** is defined as the number of clients assisted to fill out health insurance applications line-by-line, through inperson, telephone assistance or electronic submission.

**Confirmed enrollment** is defined as: 1) the number of clients who have stated that they received successful enrollment notification from insurer and/or 2) the number of clients who have been verified enrolled by appropriate insurer or computer system.

**Retention** is a service provided when we track an enrolled individual's re-application time line to Medi-Cal, and take all the available steps afforded by that individual towards their continued enrollment in, and their retention of, Medi-Cal.

**Redetermination assistance** is defined as attempting to contact 100% of clients/beneficiaries (confirmed enrolled) and making successful contact with 65% of those clients/ beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.

<sup>\*\*</sup> DMH performs retention activities without numerical target